

CCAP Case Number: _____

Sentencing Date: _____

County: _____

Offender Age: _____

**Delivery or Possession w/ Intent to Deliver THC – 200 to 1000 Grams,
Wis. Stat. § 961.41**
 (1)(h)2 (1m)(h)2

THIS WORKSHEET ONLY APPLIES TO:
 Sentencing Hearings Held On or After 7/1/2005, for TIS-II Offenses (Offenses Committed On or After 2/1/2003).

NOTE A: Where several options are presented, circle one and check **Mitigating** or **Aggravating**. [EX. Minimal / Leader]

NOTE B: Only check **Mitigating** or **Aggravating** for those factors that apply. Otherwise, leave the boxes unchecked.

| OFFENSE SEVERITY | Mitigating | Aggravating |
|--|--------------------------|--------------------------|
| Characteristics of the Offense | | |
| Weight of THC: <input type="text"/> grams | <input type="checkbox"/> | <input type="checkbox"/> |
| Cash: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dealing for Profit / Not Dealing for Profit..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Possession to Accommodate Another Person | <input type="checkbox"/> | <input type="checkbox"/> |
| Fortified Drug House..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Proximity to Weapons and/or Other Drugs | <input type="checkbox"/> | <input type="checkbox"/> |
| Conduct More Serious than Offense of Conviction..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Crime Committed in Exchange for Sexual Activity | <input type="checkbox"/> | <input type="checkbox"/> |
| Extreme Negative Impact on Neighborhood..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Vulnerability of Intended Recipient, specify:..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, specify: | <input type="checkbox"/> | <input type="checkbox"/> |
| Aggravating Factors, Wis. Stat. § 973.017 <input type="checkbox"/> N/A | | |
| Concealed or Altered Appearance..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Gang-Related Offense..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Bulletproof Clothing | <input type="checkbox"/> | <input type="checkbox"/> |
| Delivery, Distribution, or Possession with Intent to Deliver to Prisoner | <input type="checkbox"/> | <input type="checkbox"/> |
| Delivery, Distribution, or Possession with Intent to Deliver on Public Transit Vehicle | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, specify: | <input type="checkbox"/> | <input type="checkbox"/> |
| Penalty Enhancers, Wis. Stat. § 939 <input type="checkbox"/> N/A | | |
| Repeat Offender (§ 939.62) | <input type="checkbox"/> | <input type="checkbox"/> |
| Dangerous Weapon (§ 939.63)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Repeat Drug Offender (§ 961.48) | <input type="checkbox"/> | <input type="checkbox"/> |
| Distribution to Persons Under 18 (§ 961.46)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Possession Near Certain Public Places (§ 961.495) | <input type="checkbox"/> | <input type="checkbox"/> |
| Role in Offense | | |
| Minimal / Leader | <input type="checkbox"/> | <input type="checkbox"/> |
| Defendant was Manipulated or Pressured..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Abused Position of Trust / Authority | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, specify: | <input type="checkbox"/> | <input type="checkbox"/> |

| RISK FACTORS | Mitigating | Aggravating |
|--|--------------------------|--------------------------|
| Education | | |
| Grade Completed, <i>circle one:</i> -9 9 10 11 12 12+ | <input type="checkbox"/> | <input type="checkbox"/> |
| Degree Obtained: <input type="checkbox"/> None <input type="checkbox"/> GED/HSED <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Currently Enrolled | <input type="checkbox"/> | <input type="checkbox"/> |
| Employment History | | |
| Usually Employed..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Same Employer for Extended Period of Time | <input type="checkbox"/> | <input type="checkbox"/> |
| Employed When Offense was Committed or at Time of Sentencing..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Lengthy or Frequent Periods of Unemployment..... | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--|--|--------------------------|--------------------------|
| Criminal Record | | | |
| Criminal Record Not a Factor, check here <input type="checkbox"/> | | | |
| No Criminal Record | | <input type="checkbox"/> | <input type="checkbox"/> |
| Prior Misdemeanor(s), total number <input type="text"/> Assaultive Misdemeanors, total number <input type="text"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| Prior felony or felonies, total number <input type="text"/> Assaultive Felonies, total number <input type="text"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| Prior Offense(s) Similar to Current Offense..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Previously Placed on Community Supervision | | <input type="checkbox"/> | <input type="checkbox"/> |
| Criminal History Understates / Overstates Risk..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| On Legal Status / Not on Legal Status when Crime was Committed | | <input type="checkbox"/> | <input type="checkbox"/> |
| Time Since Most Recent Conviction / Incarceration: <input type="text"/> months / yrs..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Mental and Physical Health | | | |
| Mental Health Problem(s) / Physical Health Problem(s)..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Treatment for Health Problems..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol and Drug Abuse | | | |
| Under the Influence When the Offense was Committed..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Frequent Prior Abuse..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Prior Treatment..... <input type="checkbox"/> Never Treated For Alcohol/Drug Abuse | | <input type="checkbox"/> | <input type="checkbox"/> |
| Social Factors | | | |
| Married or Long-Term Relationship | | <input type="checkbox"/> | <input type="checkbox"/> |
| Resides With or Supports Children..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Family Support or Other Support Network..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Defendant Suffered Prior Abuse..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Attitude | | | |
| Remorse | | <input type="checkbox"/> | <input type="checkbox"/> |
| Accepts Responsibility..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Detailed Rehabilitative Plan in Progress..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperated with Authorities / Prosecution..... | | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, specify: | | <input type="checkbox"/> | <input type="checkbox"/> |

OFFENSE INFORMATION

| Percent of Offenders Given Probation for the Offense since 2/2003 (TIS II effective date): | Penalty Classification Level: | Permissible Penalties: |
|---|--------------------------------------|---|
| 68% | Class H Felony | Probation Fine — Maximum \$10,000 Maximum Imprisonment — 6 Years <ul style="list-style-type: none"> • Initial Confinement — Maximum 3 Years • Extended Supervision — Maximum 3 Years |

RECOMMENDED SENTENCE RANGE

| RISK FACTORS | | | |
|------------------|--|--|---|
| OFFENSE SEVERITY | Lesser | Medium | High |
| Mitigated | <input type="checkbox"/> Probation | <input type="checkbox"/> Prob. – 1 yr confinement | <input type="checkbox"/> 1 – 2 yrs confinement |
| Intermediate | <input type="checkbox"/> Prob. – 1 yr confinement | <input type="checkbox"/> Prob. – 2 yrs confinement | <input type="checkbox"/> 1 – 2½ yrs confinement |
| Aggravated | <input type="checkbox"/> Prob. – 2 yrs confinement | <input type="checkbox"/> 1 – 2 yrs confinement | <input type="checkbox"/> 2 – 3 yrs confinement |

| OTHER FACTORS THAT MAY WARRANT SENTENCE ADJUSTMENT | Mitigating | Aggravating |
|--|--------------------------|--------------------------|
| PSI Recommendation | <input type="checkbox"/> | <input type="checkbox"/> |
| Read-In Offense(s)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Effect of Multiple Counts | <input type="checkbox"/> | <input type="checkbox"/> |
| Victim Statement | <input type="checkbox"/> | <input type="checkbox"/> |
| Restitution Paid Before Sentencing | <input type="checkbox"/> | <input type="checkbox"/> |
| District Attorney (DA) Recommendation | <input type="checkbox"/> | <input type="checkbox"/> |
| Defense Attorney Recommendation | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, specify: | <input type="checkbox"/> | <input type="checkbox"/> |